U.S. Department of Turne 95-MHT-CSC United States Marshals Service

Document 75

FIROCESS RECEIPT AND RETURN

See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form

PLAINTIFF UNITED STATES OF AMERICA									COURT CASE NUMBER 3:06CR95-MHT				
DESTER WAYNE SNIPE									TYPE OF PROCESS AMENDED FINAL ORDER OF FORFEITURE				
SERVE	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN ONE HIPOINT, MODEL JCP, .40 CALIBER PISTOL, SERIAL NUMBER X704309												
AT ADDRESS (Street or RFD, Apartment No.; City, State, and ZIP Code) C/O BUREAU OF ALCOHOL, TOBACCO, FIREARMS & EXPLOSIVES													
SEND NOTICE OF SERVICE TO REQUESTER AT NAME AND ADDRESS BELOW:								Number of process to be served with this Form - 285					
John T. Harmon United States Attorney's Office Assistant United States Attorney								Number of pain this case					
Post Office Box 197 Montgomery, Alabama 36101-0197								Check for service on U.S.A.					
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Address, All Telephone Numbers, and Estimated Times Available For Service)													
AGENCY CASE # 776045-05-0155													
Signature of Attorney or other Originator requesting service on behalf of : DEFENDANT								TELEPHON (334) 2	DATE 01/08/07				
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE													
I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted) Total F			cess District of Origin No		District to Serv	ve	Signature of Authorized USMS [Deputy or Cl;erk		Date		
I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc. at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.													
I hereby certify and and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below).													
Name and litle of individual served (If not shown above).								A person of suitable age and discretion then residing in the defendant's usual place of abode.					
Address (complete only if different than shown above)								Date of Service Time		(10	am pm		
									Signature of U.S. Marshal or Deputy				
Service Fee	Total Mileage Charges (including endeavors)		Forwarding Fee To		Total Charges		ance Deposits	Amount Owed to US Marshal or		r A	Amount or Refund		
REMARKS:													
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